Change in Company's premiur revision effective 1/10	n or rate level produced by /2013	py rate
(1)	(2)	(3) Percent
<u>Coverage</u>	Annual Premium <u>Volume (Illinois)*</u>	Change (+ or -) **
1. Automobile Liability Private Passenger Commercial	\$7,737,195	+0.0%
2. Automobile Physical Damage Private Passenger Commercial	\$3,766,201	+0.0%
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity		
7. Surety		
 Boiler and Machinery Fire 		
10. Extended Coverage		
11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail 15. Other		
Line of Insurance		
Does filing only apply to certain t If so, specify:	erritory (territories) or	certain classes?
No.		·
Brief description of filing. (If forganization)		advisory
	Allstate Indemnity Companthe following rating plans for Automobile program: Good Bonus, and Tier. The rate level impact of this revenue neutral. In order to change Rate Adjustment Factorither information regarding found in the enclosed attach	Payer Discount, Loyalty change is targeted to be achieve a revenue neutral ctors have been revised. ng these changes can be
* Adjusted to reflect all prior ra ** Change in Company's premium leve result from application of new r	el which will	
	Allstate Indemnity C Name of Compan	
Ste	phen J. Burbick - State F Official - Titl	ilings Director e

H29219D

FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 12/07/2012	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger Commercial	1,677,945	5.1%
2	Automobile Physical Damag Private Passenger Commercial	747,613	1%
3. 4.	Liability Other Than Auto Burglary and Theft		
5. 6. 7.	Glass Fidelity		
7. 8. 9.	Surety Boiler and Machinery Fire		
10. 11.	Extended Coverage Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: No		
	Brief description of filing. (If find organization, specify organization):	•	dvisory e, Model Year, Driver Class,
	Discount Matrix, Zipcode Factors, a	and adding advance quote di	scount and compromised
	vehicle surcharge with new busine	ss effective date of 12/7/201	2
	*Adjusted to reflect all prior ra **Change in Company's prem		lt from application of new
	rates.	Alpha Property an	d Casualty Insurance Company
			me of Company
		Rick Miller - Produ	
			Official – Title

SUMMARY SHEET Form (RF-3)

			01/01/2013 NB
Change in	Company's premium or rate level produ	uced by rate revision effective:	03/01/2013 RN
Program:	Unity Program		
	(1)	(2)	(3)
		Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1	Automobile Liability		
	Private Passenger	\$359,247	0.00%
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$23,750	24.02%
	Commercial		
3	Liability Other Than Auto		
4	Burglary and Theft	early in the second sec	
5	Glass	****	
6	Fidelity		
7	Surety		
8	Boiler and Machinery		
9	Fire		
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13	Commercial Multi-Peril		
14	Crop Hail		
15	Other		
13	Other		-
Doos filin	g only apply to certain territory/ter	ritorios or cortain classos? If so s	enocifye
		intolles of certain classes: If so, s	specify.
i nis ming	applies to the all territories		
Briof dos	cription of filing. (If filing follows ra	tor of an advisory organization s	necify organization):
	gorithm changed from symbol base		
	oved, value factors were added.	ed to value based. Age factors we	ere modified, symbol factors
were ren	ioveu, value factors were added.		
;	* Adjusted to reflect all prior rate c	hangos	
	 Change in Company's premium le result from application of new rat 		
	result from application of new rai	.es.	
		Δmerica	n Alliance Casualty Co.
			ame of Company
		140	or company
		CI	helly McClaskey

Underwriting Manager

SUMMARY SHEET Form (RF-3)

			01/01/2013 NB
Change in	Company's premium or rate level produ	uced by rate revision effective:	03/15/2013 RN
Program:	Allied Program		
-	(1)	(2)	(3)
	` ,	Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1	Automobile Liability		
	Private Passenger	\$9,620,642	0.00%
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$2,644,809	-3.47%
	Commercial		
3	Liability Other Than Auto		
4	Burglary and Theft		
5	Glass		
6	Fidelity		
7	Surety		
8	Boiler and Machinery		
9	Fire	·	
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13	Commercial Multi-Peril		
14	Crop Hail		
15	Other		
	g only apply to certain territory/ter g applies to all territories	ritories or certain classes? If so, s	specify:
Rating al	cription of filing. (If filing follows ra gorithm changed from symbol base noved, value factors were added, b	ed to value based. Age factors we	ere modified, symbol factors
	* Adjusted to reflect all prior rate c	_	
*	 Change in Company's premium le result from application of new rat 		
		Δmerica	ın Alliance Casualty Co.
			ame of Company
		144	and or company
		ς	helly McClaskey
			erwriting Manager
		Ond	C

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

POPULAR & DYNAMIC PROGRAMS

Change in Company's premium or rate level produced by rate revision effective <u>January 1, 2013 for New Business</u> March 1, 2013 for Renewals		
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)* - (000)	(3) Percent <u>Change (+ or-)**</u>
Automobile Liability Passenger Commercial	\$6,350	+3.29%
Automobile Physical Damage Private Passenger Commercial	\$6,356	+2.38%
3. Liability Other Than Auto	-	
 Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners 		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
All classes and territories	ories) or certain classes? If so, specify: of an advisory organization, specify organization	on):
Opudie to Base Rates, Opudie EFT fee for Cit	edit Card	
*Direct Earned Premium from Annual Stateme **Change in Company's premium level which v	will result from application of new rates.	n Freedom Insurance Company
		Name of Company
		N -UNDERWRITING SUPERVISOR Official - Title

	rate level produced by rate revision effective	01/17/13
(1)	(2)	(3)
(1)	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)*
Automobile Liability	#F 050 000	2.007
Private Passenger	\$5,952,230	2.0%
Commercial		
2. Automobile Physical Damag		2.00/
Private Passenger	\$3,107,108	2.0%
Commercial		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Does filing only apply to certain to No.	erritory (territories) or certain classes? If so, spec	eify:

With this filing, Encompass Home to its Private Passenger Automobil	ng follows rates of an advisory organization, speci e and Auto Insurance Company is proposing a 2.0 le program. The Rate Adjustment Factors have be al revisions have been made to the Territory Defin	% overall rate level of een revised to reach t
With this filing, Encompass Home to its Private Passenger Automobil proposed rate. In addition, editorial *Adjusted to reflect all prior rate	e and Auto Insurance Company is proposing a 2.0 le program. The Rate Adjustment Factors have be al revisions have been made to the Territory Defin	% overall rate level of een revised to reach t
With this filing, Encompass Home to its Private Passenger Automobil proposed rate. In addition, editorial *Adjusted to reflect all prior rate	e and Auto Insurance Company is proposing a 2.0 le program. The Rate Adjustment Factors have be al revisions have been made to the Territory Defined to the Territory Defin	19% overall rate level een revised to reach nitions.
With this filing, Encompass Home to its Private Passenger Automobil proposed rate. In addition, editorial *Adjusted to reflect all prior rate	e and Auto Insurance Company is proposing a 2.0 le program. The Rate Adjustment Factors have be al revisions have been made to the Territory Definition of the Territory D	9% overall rate level of cen revised to reach the nitions.
With this filing, Encompass Home to its Private Passenger Automobil proposed rate. In addition, editorial *Adjusted to reflect all prior rate	cand Auto Insurance Company is proposing a 2.0 le program. The Rate Adjustment Factors have be al revisions have been made to the Territory Definition of the Territory De	o Insurance Company
With this filing, Encompass Home to its Private Passenger Automobil proposed rate. In addition, editorial *Adjusted to reflect all prior rate	e and Auto Insurance Company is proposing a 2.0 le program. The Rate Adjustment Factors have be al revisions have been made to the Territory Definition of the Territory D	o Insurance Compan

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or r	ate level produced by rate revision effective	01/19/2013
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$1,406,377	6.1%
2. Automobile Physical Damage	ial #1 202 710	4.9%
Private Passenger Commercial 3. Liability Other Than Auto		4.9%
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	· · · · · · · · · · · · · · · · · · ·	
14. Crop Hail		
15. Other		
Does filing only apply to certain terand classes.	rritory (territories) or certain classes? If so, speci	fy: This filing applies to all territories
reivsing our territorial base rates an	llows rates of an advisory organization, specify organization, spe	sions contained within this filing result
*Adjusted to reflect all prior rate cha **Change in Company's premium le	anges. Evel which will result from application of new rates.	
		erty Insurance Corporation Jame of Company
		Industry Filing Analyst
		Official – Title

FORM	(RF-3)
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,702,726	7.0% -1.8%
,004,733	-1.8%
erritory (territorie	es) or certain
follows rates of	f an advisory
	Insurance Company proposes to
decrease base rate	es for COLL and RR for an overall
hanges. level which will	result from application of ne
GEICO Gen	eral Insurance Company
	follows rates of GEICO General decrease base rate hanges. level which will

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

| F | $\bigcap F$ | SM | /R | F-3) |
|---|-------------|----|----|------|
| | | | | |

SUMMARY SHEET

| Change in Company's premiue effective 01/24/2013 | ım or rate level produced | by rate revision |
|--|--------------------------------|--|
| (1) | (2)
Annual Premium | (3)
Percent |
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | 16,050,786 | 3.9% |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | 10,966,438 | -5.7 |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | |
| Does filing only apply to certa Classes? If so, | ain territory (territories) or | certain |
| specify: No | | |
| <u></u> | | |
| Brief description of filing. (If f | iling follows rates of an a | dvisory |
| Organization, specify | 70.10170 14.100 01 411 4 | ······································ |
| organization): | GEICO Indemnity Con | npany proposes to increase base |
| rates for BI and MP and decrease | | |

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

| GEICO Indemnity Company | |
|-------------------------|--|
| Name of Company | |
| Official – Title | |

FORM (RF-3)

| (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|---|---|---|
| Automobile Liability Private | voidino (illinois) | - Change (101) |
| Passenger | 8,577,858 | 7.0% |
| Commercial | 0,0,000 | |
| Automobile Physical Damag | *************************************** | |
| Private Passenger | 7,937,792 | -1.8% |
| Commercial | | |
| iability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | *************************************** | |
| Boiler and Machinery | | |
| Fire | *************************************** | · |
| Extended Coverage | | |
| nland Marine | | |
| domeowners | | *************************************** |
| Commercial Multi-Peril | | |
| Crop Hail | ······································ | |
| Other Life of Insurance | | |
| Life of frisularice | | |
| Does filing only apply to cer | tain territory (territories) o | r certain |
| Classes? If so, | | |
| specify: No | | |
| | | |
| Brief description of filing. (If | filing follows rates of an a | advisory |
| Organization, specify | Covernment Employe | saa Inguranga Campany arar |
| organization): | | es Insurance Company prop |
| to increase base rates for BI and increase of 2.8%. | PD and decrease base rates | ior COLL and RR for an over |
| *Adjusted to reflect all prior | rate changes | |
| **Change in Company's pre | | ult from application of ne |
| | | an norm apphoanon of the |
| rates. | | |

FORM (RF-3)

| Change in Company's premium or ra | te level produced by rate revision |
|-----------------------------------|------------------------------------|
| effective 03/01/2013 | |

| | (1)
Coverage | (2)
Annual Premium
Volume (Illinois) * | (3) Percent Change (+or-) ** |
|---|---|--|-------------------------------|
| - | Automobile Liability Private | | |
| | Passenger | 3,216,096 | -5% |
| | Commercial | | |
| | Automobile Physical Damag | *************************************** | |
| | Private Passenger | 2,805,734 | +8% |
| | Commercial | | |
| | Liability Other Than Auto | | |
| | Burglary and Theft | | |
| | Glass | | |
| | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | * | |
| | Extended Coverage | *************************************** | |
| | Inland Marine | | |
| | Homeowners | | |
| | Commercial Multi-Peril | | |
| | Crop Hail | | |
| | Other | | |
| | Life of Insurance | | |
| | Does filing only apply to certa Classes? If so, specify: No | in territory (territories) or | rcertain |
| | Brief description of filing. (If fi | ling follows rates of an a | advisorv |
| | Organization, specify | g | , |
| | organization): | Territory realignment, | base rate changes to minimize |
| | impact of territory changes. | | |
| | | | |
| | *Adjusted to reflect all prior ra
**Change in Company's prem
rates. | • | ılt from application of new |
| | Tutos. | Hastings Mutual Ir | nsurance Company |
| | | | me of Company |
| | | Ellen T. Haas Pro | |
| | | Liigii I. Haas I Id | Juuci Manauei |

| (1) Annual Premium Volume (Illinois)* Change (+ or -)** 1. Automobile Liability Private Passenger \$ 4,012,396 | C | Change in Company's premium or rate l | evel produced by rate revision effect | 2/12/2013NB / 3/22/2013
Renewals |
|--|-----------|--|--|--|
| Coverage Annual Premium Percent Change (+ or -)** | | (1) | (2) | (3) |
| Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Inland Marine Crop Hail Crop Hail Crop Hail Cother Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Name of Company | | | Annual Premium | Percent |
| Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Adjusted to reflect all prior rate changes. * Adjusted to reflect all prior rate changes. | . 1. | Automobile Liability | | |
| 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Name of Company Name of Company Name of Company | | | \$ 4,012,396 | +1.2% |
| Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | 2. | | | |
| 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Name of Company Robin Upchurch Senior State Filing Analyst, | * | | \$3,344,151 | +1.1% |
| 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | • | | | |
| 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | *************************************** |
| 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | • • | | |
| 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | • | | |
| 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | · · · · · · · · · · · · · · · · · · · |
| 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| Does filing only apply to certain territory (territories) or certain classes? If so, specify: The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company | 13. | | | |
| The filing proposed base rate revisions for some territories. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | Zine of moderate | | |
| Brief description of filing. (If filing follows rates of an advisory organization, specify organization): An overall impact of +1.1% consists of a uniform base rate revisions across all coverages for some territories. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | cify: |
| * Adjusted to reflect all prior rate changes. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | The fi | ling proposed base rate revisions for so | ome territories. | |
| ** Change in Company's premium level which will result from application of new rates. Harleysville Lake States Insurance Company Name of Company Robin Upchurch Senior State Filing Analyst, | An ov | verall impact of +1.1% consists of a uni | ates of an advisory organization, spec
form base rate revisions across all co | cify organization): overages for some territories. |
| Company Name of Company Robin Upchurch Senior State Filing Analyst, | ** Ch | ange in Company's premium level whi | ch will | |
| Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | | |
| Company Name of Company Robin Upchurch Senior State Filing Analyst, | | | Н | arleysville Lake States Insurance |
| Robin Upchurch Senior State Filing Analyst, | | | | |
| Senior State Filing Analyst, | | | | Name of Company |
| Senior State Filing Analyst, | | | D | ohin Unchurch |
| | | | | |
| | | | | Official - Title |

ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's pro | emium or rate level- | produced by rate revision effective _ | 1/19/2013 |
|--|--------------------------|--|---|
| (1)
<u>Coverage</u> | ! | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| Automobile Liability F | Private | | |
| Passenger Comr | | \$148,442 | 6.1% |
| 2. Automobile Physical | | *************************************** | |
| Private Passenge | | \$130,678 | 5.5% |
| 3. Liability Other Than A | uto | | |
| 4. Burglary and Theft | | | |
| 5. Glass | | | |
| 6. Fidelity | | | |
| Surety Boiler and Machinery | | | |
| Boiler and Machinery Fire | | | |
| 10. Extended Coverage | | | |
| 11. Inland Marine | | | |
| 12. Homeowners | | | |
| 13. Commercial Multi-Pe | ril | | · · · · · · · · · · · · · · · · · · · |
| 14. Crop Hail | | | |
| 15. Other | | | |
| Line of Inst | ırance | | |
| Does filing only apply to and classes. | certain territory (ter | ritories) or certain classes? If so, s | specify: This filing applies to all territories |
| Brief description of filing. | (If filing follows rate: | s of an advisory organization, specif | y organization): With this filing we are |
| reivsing our territorial bas | e rates and introduc | cing a new Cycle Guard factor. The | revisions contained within this filing result |
| in an overall rate impact of | of +6.0%. There is no | o current rate effect from Cycle Gua | ard as the factor of 1.03 will not be applied |
| until 1 year after the cour | ter date (01/19/2013 | 3). | 78049A-10 |
| | | | |
| | | | |
| *Adjusted to reflect all pri
**Change in Company's p | | will result from application of new ra | ates. |
| | | Liho | erty Insurance Corporation |
| | | Libe | Name of Company |
| | | | |
| | | Lana | Ji - Industry Filing Analyst |
| | | | Official – Title |

ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate-le | evel produced-by-rate revision-effective | 01/19/2013 |
|---|---|---|
| (1) | (2)
Annual Premium | (3)
Percent |
| Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| Automobile Liability Private | | |
| Passenger Commercial | \$30,963,713 | 6.0% |
| 2. Automobile Physical Damage | | |
| Private Passenger Commercial | \$29,240,465 | 5.8% |
| Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety8. Boiler and Machinery | | |
| 8. Boiler and Machinery 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |
| Does filing only apply to certain territory and all classes. | (territories) or certain classes? If so, spec | ify: This filing applies to all territories |
| revising our territorial base ratesand intro | rates of an advisory organization, specify or
oducing a new Cycle Guard factor. The revi-
s is no current rate effect from Cycle Guard a
/2013). | sions contained within this filing result |
| *Adjusted to reflect all prior rate changes **Change in Company's premium level w | i.
hich will result from application of new rates | |
| | | |
| | Liberty Mutu | al Fire Insurance Company Name of Company |
| | | vame of Company |
| | Lana Ji - | Industry Filing Analyst |
| | | Official – Title |

| Form | (RF-3) | |
|------|--------|--|

Change in Company's premium or rate level produced by rate revision effective: March 1, 2013 New / March 15, 2013 Renewal

| | (1) | (2) Annual Premium | (3) Percent |
|----|--|---|-------------------------------|
| _ | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1 | Automobile Liability | | |
| ١. | Private Passenger | 34,085,066 | 8.7% |
| | Commercial | | |
| 2 | Automobile Physical Damage | | |
| | Private Passenger | 23,017,642 | 0.7% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| | Burglary and Theft | - | |
| | Glass | | |
| 6. | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | | |
| 10 | . Extended Coverage | | |
| | . Inland Marine | | |
| 12 | . Homeowners | | |
| 13 | . Commercial Multi-Peril | | |
| 14 | . Crop Hail | | |
| 15 | . Other | | |
| | Line of Insurance | | |
| Dr | see filing only apply to certain territor | y (territories) or certain classes? If so, spec | nifv. |
| | ate Zone Factors were revised for so | | y. |
| | ate Zone i actors were revised for so | The dread throughout the state. | |
| _ | | | |
| Br | ief description of filing. (If filing follow | ws rates of an advisory organization, specify | y organization): |
| | | ier Discount, Medical Payments Increased I | |
| C | emprehensive Deductible Factors, M | ultiple Product and Multiple Car Discounts, | Primary Rating Class Factors. |
| | | | |

MemberSelect Insurance Company
Name of Company

Judith M. Feldmeier

Vice President & Chief Actuary, F.C.A.S., M.A.A.A.

^{*} Accident Year Premium @ CRL

^{**} Change in Company's premium level which will result from application of new rates.

Form (RF-3)

| | | | 12/3/2012 |
|-------------|---|--|-----------------------|
| Change in (| Company's premium or rate level produ | uced by rate revision effective: | 2/3/2013 |
| | KAI IL Patriot | | |
| | (1) | (2) | (3) |
| | , , | Annual Premium | Percent |
| | <u>Coverage</u> | Volume (Illinois)* | Change (+ or -)** |
| | 3573738 | <u></u> | |
| 1 | Automobile Liability | | |
| | Private Passenger | * \$1,800,727 | 3.8% |
| | Commercial | | |
| 2 | Automobile Physical Damage | | |
| | Private Passenger | * \$693,327 | 3.5% |
| | Commercial | | |
| 3 | Liability Other Than Auto | | |
| 4 | Burglary and Theft | The state of the s | 74.00 |
| 5 | Glass | | |
| 6 | Fidelity | | |
| 7 | Surety | | |
| 8 | Boiler and Machinery | | |
| 9 | Fire | | |
| 10 | Extended Coverage | · · · · · · · · · · · · · · · · · · · | |
| | Inland Marine | | |
| 11 | | | |
| 12 | Homeowners | | |
| 13 | Commercial Multi-Peril | | |
| 14 | Crop Hail | <u></u> | |
| 15 | Other | | |
| | | * Estimated WP | |
| D 611: | | | |
| Does tiling | gonly apply to certain territory, ter | ritories or certain classes? If so, sp | респу: |
| Filing ann | lies to all territories | | |
| Filing app | lies to all territories | | |
| Brief desc | cription of filing. (If filing follows ra | ites of an advisory organization on | ecify organization): |
| | ier factor for New Business | ites of all advisory organization, sp | ectry organization). |
| micrease e | ici factor for factor business | | |
| | | | |
| * | ' Adjusted to reflect all prior rate c | hanges | |
| | Change in Company's premium le | | |
| | result from application of new rate | | |
| | у стану при | | |
| | | | |
| | | Mendako | ota Insurance Company |
| | | | me of Company |
| | | 740 | |
| | | | Robert Dawson |
| | | | VP Product |
| | | | VI FIOUUCL |

| _ : | FΑ | R١ | 1-1 | R | F-3 | ١. |
|-----|----|----|-----|---|-----|----|
| | _ | | " | | | , |

| (1)
Coverage | (2)
Annual Premium
Volume (Illinois) * | (3) Percent Change (+or-) ** |
|---|--|---|
| Automobile Liability Private | Voidino (illinoio) | - Change (*or) |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | 2,294,439.00 | -2.4% |
| Commercial | | |
| iability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | #P | |
| Fidelity
Surety | | |
| Boiler and Machinery | ************************************** | |
| Fire | | |
| Extended Coverage Inland Marine | | |
| | ************************************** | , |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | |
| Does filing only apply to certai | n territory (territories) o | r certain |
| Classes? If so, | • | |
| specify: | | |
| D : 5 A (16.5) | l'a fall a santa a factor | |
| Brief description of filing. (If fil
Organization, specify | ling follows rates of an a | advisory |
| organization): | company is adjusting | the rate classes which are |
| on the age of the insured | <u> </u> | |
| | | |
| *Adjusted to reflect all prior rat | | |
| | ium level which will resu | ılt from application of n |
| | | - · · · · · · · · · · · · · · · · · · · |
| | | |
| **Change in Company's premi
rates. | National Heritage | |
| | National Heritage | ime of Company |

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective December 21st, 2012 for New Business.

| | (1) | (2) Annual Premium | (3) Percent | |
|----------------------|---|---------------------|--------------------|--|
| 1. | Coverage Automobile Liability | Volume (Illinois)* | Change (+ or -) ** | |
| 1. | Private Passenger | \$9,627,719 | 8.8% | |
| | Commercial | 33,027,713 | 0.070 | |
| 2. | Automobile Physical Damage | | | |
| ۷. | Private Passenger | \$3,999,711 | 0.0% | |
| | Commercial | 33,333,711 | 0.070 | |
| 3. | Liability Other Than Auto | | | |
| 3.
4. | Burglary and Theft | | | |
| 4 .
5. | Glass | | | |
| 5.
6. | Fidelity | | | |
| 7. | Surety | | | |
| 7.
8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | , | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Does filing only apply to certain territor If so, specify: No, this filing applies to all territories a Brief description of filing. (If filing follows rates of an advisory org | nd all classes. | | |
| | Changing Base Rates, Driver Class Factor | | | |
| | | | | |
| | *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. | | | |
| | Safe Auto Insurance Company | | | |
| | | Name of Co | | |
| | | Terry D. Gusler, VF | | |
| | | Official - | Title | |

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2013 for new business and renewal business for private passenger, resulting in an overall decrease of -4.6%.

| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)</u> * | (3)
Percent
<u>Change (+ or -)**</u> |
|---|---|--|
| Automobile Liability Private | | |
| Passenger Commercial | 16,333,856 | -4.6% |
| Automobile Physical Damage | | |
| Private Passenger Commercial | 7,236,367 | -4.6% |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | - AND THE AND | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. OtherLine of Insurance | | |
| Ente of mountaine | | |
| Does filing only apply to certain territory | (territories) or certain classes? If so, specify | : <u>No</u> |
| Brief description of filing. (If filing follows | s rates of an advisory organization, specify | organization): This filing proposes to |
| | e risks. These changes decreases the overa | all premium by -4.6%.This is estimated |
| based on premium distributions. | | |
| | | |
| | | |
| *Adjusted to reflect all prior rate changes **Change in Company's premium level w | :.
hich will result from application of new rate: | S |
| | Safewa | ay Insurance Company |
| | Jaiewa | Name of Company |
| | | |
| | Denise Farnan - | Consulting Actuary Perr & Knight |
| | - 100 | Official - Title |

| | Change in Company's premium-or rate- | evel-produced-by rate-revision effectiv | e- 3-11-2013 — — - |
|------------|---|--|----------------------------------|
| | | · | |
| | (1) | (2) | (3) |
| | | Annual Premium | Percent |
| | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| | | | |
| 1. | Automobile Liability | | |
| | Private Passenger | 10,951,087 | +0.6% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 8,044,112 | -0.2% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | - 1. |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | <u> </u> | |
| | | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| D (| | *4. * | S |
| | iling only apply to certain territory (terr | itories) or certain classes? If so, specif | y: |
| No | | | |
| , | | | |
| D . C | 1 | | |
| | lescription of filing. (If filing follows r | | |
| | filing consists of revised base rates for | | |
| | odel Year factor has been added. New | | |
| | ailers is now a flat dollar for all territori | | |
| and t | he factors for Collision and Comprehen | sive are now combined with the rate ci | ass factor. The Comprehensive |
| | Symbols for Z2 trailers have been revis | | s for all vehicle types show all |
| | rounded to the nearest penny. Editoria | | 001 |
| | overall effect of this filing is expected to | | 881. |
| | djusted to reflect all prior rate changes. | | |
| | hange in Company's premium level whi | ch will | |
| re | sult from application of new rates. | | |
| | | | |
| | | | |
| | | | |
| | | She | Iter General Insurance Co. |
| | | | Name of Company |
| | | | |
| | | | |
| | | | |
| | | | n Marcks - Coordinator of Ins. |
| | | _ Der | t. Affairs |
| | | | Official - Title |

| Form | (RF-3) |
|------|--------|
|------|--------|

| Private Passenger 7.736,941 0.0% Commercial Automobile Physical Damage Private Passenger 5,016,391 0.0% Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire 0. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance 5. If so, specify: | | | (2)
Annual Premium
Volume (Illinois) | (3) Percent Change (+ or -) | |
|---|-----------|--|--|--------------------------------------|---|
| Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Output Description of filing. (If filing follows rates of an advisory organization, specify organization): | • | Private Passenger | 7.736,941 | 0.0% | |
| Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Does filing only apply to certain territory (territories) or certain classes? If so, specify: | | Private Passenger | | 0.0% | |
| Glass Fidelity Surety Boiler and Machinery Fire D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: o. prief description of filing. (If filing follows rates of an advisory organization, specify organization): | | Liability Other Than Auto | | | |
| Surety Boiler and Machinery Fire D. Extended Coverage Inland Marine D. Homeowners C. Homeowners C. Commercial Multi-Peril C. Crop Hail C. Other Line of Insurance Des filling only apply to certain territory (territories) or certain classes? If so, specify: D. D. Crop Hail D. Crop Hail D. Other Line of Insurance Des filling only apply to certain territory (territories) or certain classes? If so, specify: D. Crop Hail D. Crop | | Glass | | | |
| Fire D. Extended Coverage I. Inland Marine D. Homeowners Commercial Multi-Peril Crop Hail Dine of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Direct description of filing. (If filing follows rates of an advisory organization, specify organization): | | Surety | | | |
| 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance oes filing only apply to certain territory (territories) or certain classes? If so, specify: o. rief description of filing. (If filing follows rates of an advisory organization, specify organization): | | Fire | | | |
| 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance oes filing only apply to certain territory (territories) or certain classes? If so, specify: o. rief description of filing. (If filing follows rates of an advisory organization, specify organization): | | | | | |
| constitution of filing. (If filing follows rates of an advisory organization, specify organization): | | | | | |
| Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Does filing only apply to certain territory (territories) or certain classes? If so, specify: Does filing only apply to certain territory (territories) or certain classes? If so, specify: | | | | | |
| Line of Insurance oes filing only apply to certain territory (territories) or certain classes? If so, specify: o. rief description of filing. (If filing follows rates of an advisory organization, specify organization): | 4. | • | | | |
| oes filing only apply to certain territory (territories) or certain classes? If so, specify: o. rief description of filing. (If filing follows rates of an advisory organization, specify organization): | Э. | | | | |
| | oe
lo. | | | asses? If so, specify: | |
| | rie | f description of filing. (If filing followsion to class plan factors, tier factors. | ws rates of an advisory or
ors, and territorial base ra | ganization, specify organi
tes. | zation): |
| Twin City Fire Insurance Company | rie | f description of filing. (If filing followsion to class plan factors, tier factors. | ws rates of an advisory or
ors, and territorial base ra | tes. | |
| Twin City Fire Insurance Company Name of Company | Brie | f description of filing. (If filing follows sion to class plan factors, tier factors.) | ws rates of an advisory or
ors, and territorial base ra | tes. Twin City Fire I | nsurance Company |
| Twin City Fire Insurance Company Name of Company Ben Ewbank - Actuarial Associate Official - Title | Brie | f description of filing. (If filing followsion to class plan factors, tier factors. | ws rates of an advisory or
ors, and territorial base ra | Twin City Fire I Name Ben Ewbank - A | nsurance Company of Company Actuarial Associate |

| FORM | (RF-3 |) |
|-------------|-------|---|
|-------------|-------|---|

SUMMARY SHEET

| Change in Company's premium or ra | te level produced by rate revision |
|-----------------------------------|------------------------------------|
| effective 01/01/2013 | |

| - | (1) | (2)
Annual Premium | (3)
Percent | | |
|---|--|---|---|--|--|
| | Coverage | Volume (Illinois) * | Change (+or-) ** | | |
| | Automobile Liability Private | volume (minois) | Change (101-) | | |
| | Passenger | 20,115,582 | 0 | | |
| | Commercial | | 0 | | |
| | Automobile Physical Damag | 1,364,209 | U | | |
| | Private Passenger | 14,640,372 | • | | |
| | Commercial | 198,670 | 0 | | |
| | Liability Other Than Auto | 130,070 | | | |
| | Burglary and Theft | | | | |
| | Glass | | | | |
| | Fidelity | | | | |
| | Surety | | | | |
| | Boiler and Machinery | | 4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | |
| | Fire | | | | |
| | Extended Coverage | | | | |
| | Inland Marine | | | | |
| | Homeowners | | | | |
| | Commercial Multi-Peril | | | | |
| | Crop Hail | | | | |
| | Other | | | | |
| | Life of Insurance | | | | |
| • | Does filing only apply to certa Classes? If so, | ain territory (territories) o | r certain | | |
| | specify: This fill | ng affects all territories. All ag | ge groups 30-69 have new | | |
| | classes assigned. The full coverag | e discount is reduced. | | | |
| | Brief description of filing. (If f | iling follows rates of an a | advisory | | |
| | Organization, specify | | • | | |
| | organization): | All ages 30-69 reclass | sified into smaller groups and | | |
| | assigned new class codes. We do not expect any appreciable effect on premium volume. | | | | |
| | Decrease full coverage discount from 15% to 10% | | | | |
| | **Change in Company's prem | *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new | | | |
| | rates. | | | | |
| | | Unique Insurance | | | |
| | | | ame of Company | | |
| | | Paul Pitalis, Cons | _ | | |

Paul Pitalis, Cons.

Official - Title